



## Health Information Systems Program - SA

**WBPHCOT / CHW eRPMS**

***Mobile data capturing Pilot in Thabo Mofutsanyane***

***16 May 2018***

***Ntuthu Dhlamini***



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# Overview

- Introduction
- Performance management
- Patient management
- Data flow
- Users
- Results
- Feedback



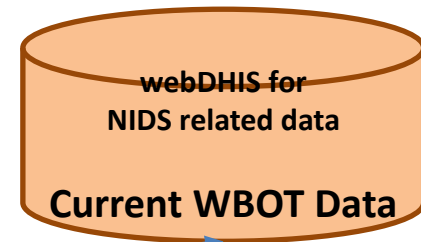
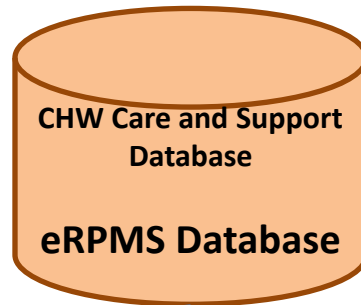
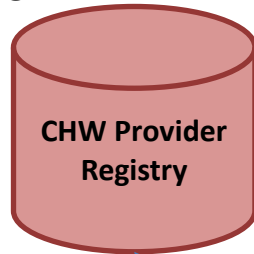
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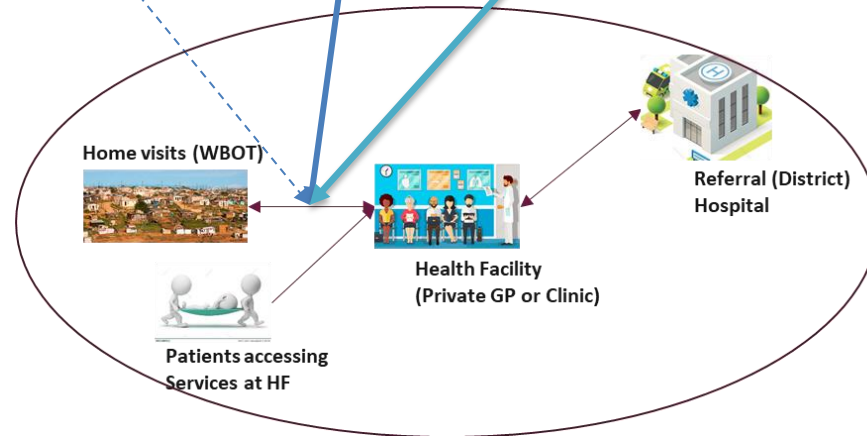


# WBOT Segment Architecture

Repository of CHW  
personal/HR  
information  
**Est 50,000 CHW**

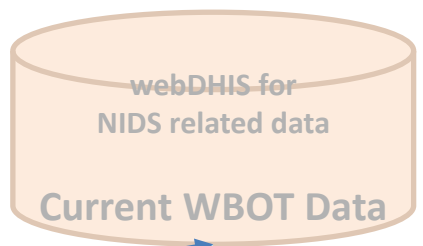
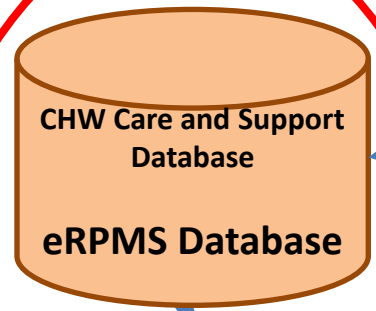
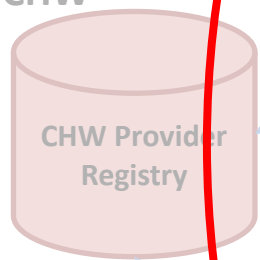


- Receives monthly reports from CHW based on care and support services. These reports document which of the CHW Teams are in fact providing services that month.
- Data from CHW is aggregated at either facility level
- Aggregated data fed into National DHIS database
- **Currently 3,323 Active teams**
- **Est `33,000 CHW**



# WBOT Segment Architecture

Repository of CHW  
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Est 50,000 CHW

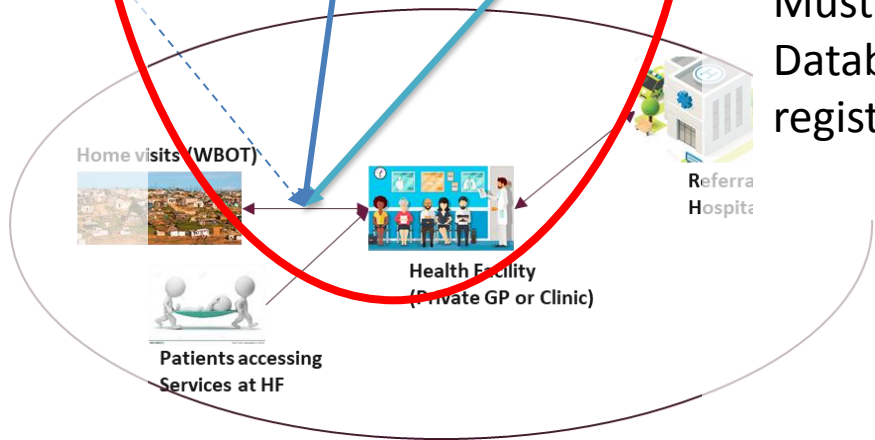


**Focus of our presentation:**

- eRPMS gathers data on
- 1. Individual CHW activities
- 2. CHW are linked to CHW Teams
- 3. Individual Households

Feeds data into Aggregated WBOT database

Must link to CHW Registration Database to authenticate CHW registration



# Free State Pilot: CHW Mobile Data Capture

## Why mobile capturing

- NDoH focuses on improvement of systems and processes to ultimately improve health outcomes
- Free State requested support for mobile capturing of CHW data (re-capturing)
- HISP wanted to test mobile capturing in CHW setting after successful HPV mobile capturing – over 450,000 girls, 2000 tablets

## Objectives - support

- a. Improved access to and use of CHW data at local level
- b. Enhancing CHW quality of care
- c. Improved in CHW supervision and management
- d. Improving data quality & data flow time lines
- e. Reduction of costs (printing, logistics, version changes)

**Selection of pilot site was based on existing WBOT data**

# HISP Principles

- Strengthening, and building on existing systems – thus the DHIS, existing reporting systems, and existing ME frameworks;
- NDoH owns the data and hosted on servers in SA
- Free and Open Source Software
- Keeping costs in the sustainable category
  - Data costs
  - Other costs – support, such as training of DIO's,
- Slowly but steadily contributing to the development of electronic HIS in South Africa

# Tracker Implementation at Thabo Mofutsanyane

- A tracker APP posting data directly into webDHIS was developed. It has the following features:
  - CHW registration
  - Target setting and monitoring
  - Household registration
  - Assessment of each household member
  - Scheduling of visits
  - Referral and back-referral
  - Dashboards
- 5 Teams, 33 CHWs, 3 OTLs trained
- Data capturing from Oct 2017
- Supported by
  - T Mof DIO and Network Controller,
  - HISP remotely + weekly support visit

These provide info on:

- **Individual patients**
  - LTFU
  - Referrals
- **Households**
  - Esp at risk
- Feeds into the CHW **Performance Management Framework**

# CHW registration

- The education information and employment details are captured in CHW profile
- Details can be updated regularly
- Each CHW is linked to a team led by an OTL

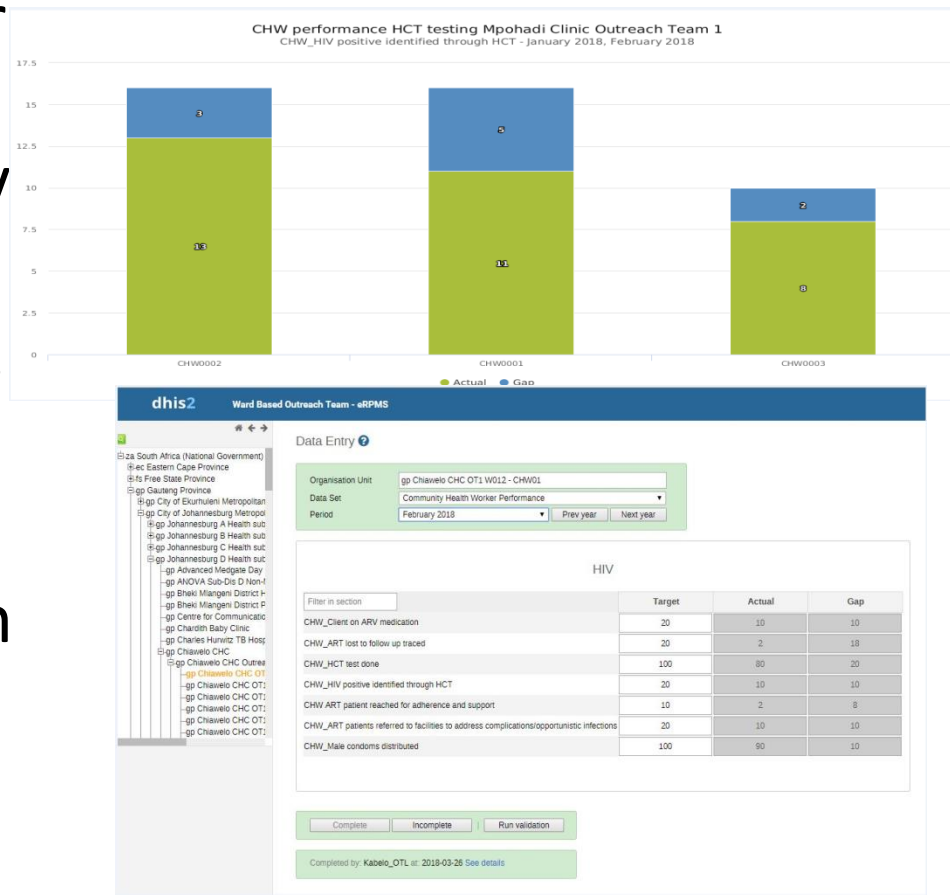
← Education Information	
Capture Date	×
2018-02-02	
i / * Highest Tertiary qualification	×
Certificate	
i / * Date Completed	×
2005-12-02	
i / * Qualification name	
N3 National Certificate	
i / * University/College name	
Maluti FET	
i / * Country where qualification was obtained	
S.A	
i / * Professional Registration	×
None	
i / <input checked="" type="checkbox"/> OTL In-service job training (HIV services Phase 1)	
i / * Registration/start date HIV services Phase 1	×
2016-04-10	





# Targets and outputs – supporting Performance Mx

- OTL can set targets for CHW monthly and monitor progress daily
- OTL can see the actual performance vs the gap in a graph or pivot table
- OTL can identify which CHWs need support by monitoring progress



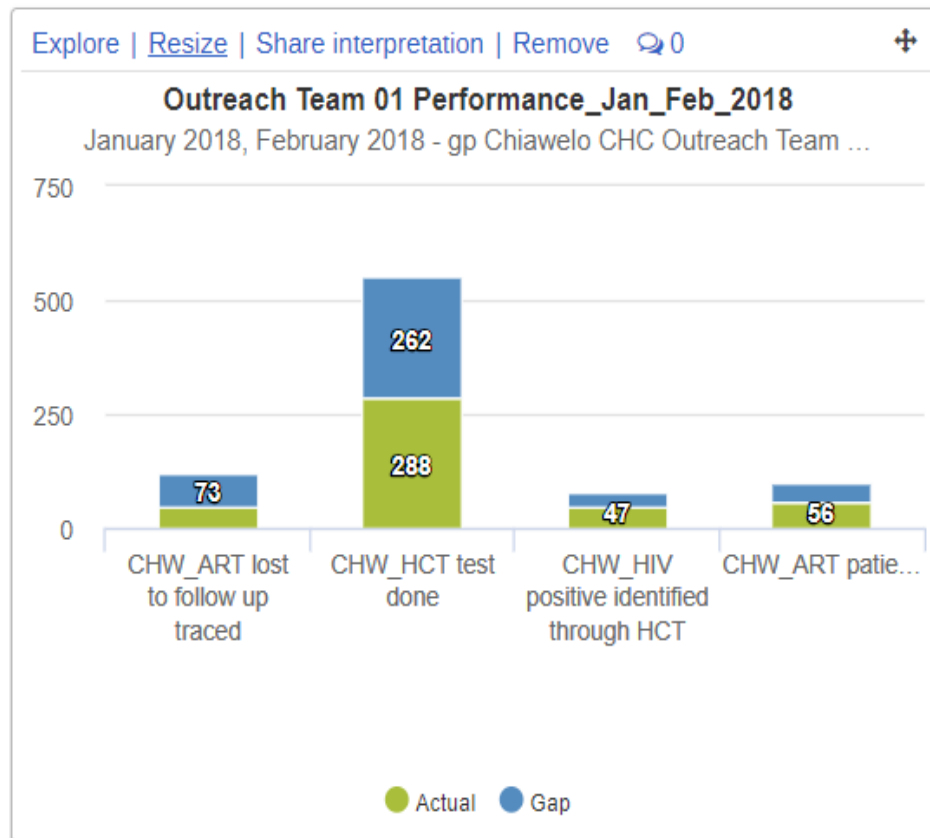
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# Aggregation by WBPHCOT – Supporting Performance Mx

- Data is aggregated to show team performance
- Team performance is aggregated to reflect facility performance
- Seamless integration of NIDS with Provincial DB



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# Registration supporting Patient Management

- Each individual is registered and given a household ID linking her to HH
- GPS coordinates populate automatically when network is available

The screenshot shows a mobile application interface titled 'Profile'. It contains several input fields for patient information:

- Household rooms:** A text field containing the number '2'.
- Annual household income:** A text field containing 'R 9 601 - R 19 200'.
- \* First Name:** A text field containing 'Sipho'.
- \* Surname:** A text field containing 'Dhlamini'.
- Identity number:** A text field with the placeholder 'Enter text'.
- Passport number:** A text field with the placeholder 'Enter number'.
- \* Date of birth:** A date picker field showing '1992-03-26'.
- \* Sex:** A radio button selection with 'Male' selected and 'Female' as an option.



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his/

# Assessment, monitoring and data entry supporting Patient Management

- A list of assessment questions are asked by CHW and responses captured on device
- The CHW is prompted to refer client where applicable

← Visit Information ▶

\* Did you refer the client for TB Symptoms  
☒ Yes ☐ No

i / Would you like to have an HIV test?  
☐ Yes ☒ No

i / Are you taking daily medication?  
☒ Yes ☐ No

i / ☐ Are you on TB medication?

i / ☐ Are you taking diabetes medication?

i / ☐ Are you taking any hypertension medication?

i / ☒ Are you on ARV medication?

\* ART lost to follow-up traced  
☐ Yes ☒ No

\* Defaulter referred to facility  
☐ Yes ☒ No

i / \* Do you need assistance with daily living activities?  
☒ Yes ☐ No

i / \* Do you need assistance applying for social grants?  
☒ Yes ☐ No

UP ↑



# Work Planning and Scheduling supporting Patient Management

← UPCOMING EVENTS

gp Chiawelo CHC OT1 W012 - CHW01

Client Registration

**UPCOMING**

Start date: 2018-05-11    End date: 2018-05-18

🔍

UPCOMING EVENTS			
First Name	Surname	Event name	Due date
Lesedi	Mokoena	Visit and Referral	2018-05-18

← UPCOMING EVENTS

gp Chiawelo CHC OT1 W012 - CHW01

Client Registration

**OVERDUE**

Start date: 2018-04-01    End date: 2018-05-01

🔍

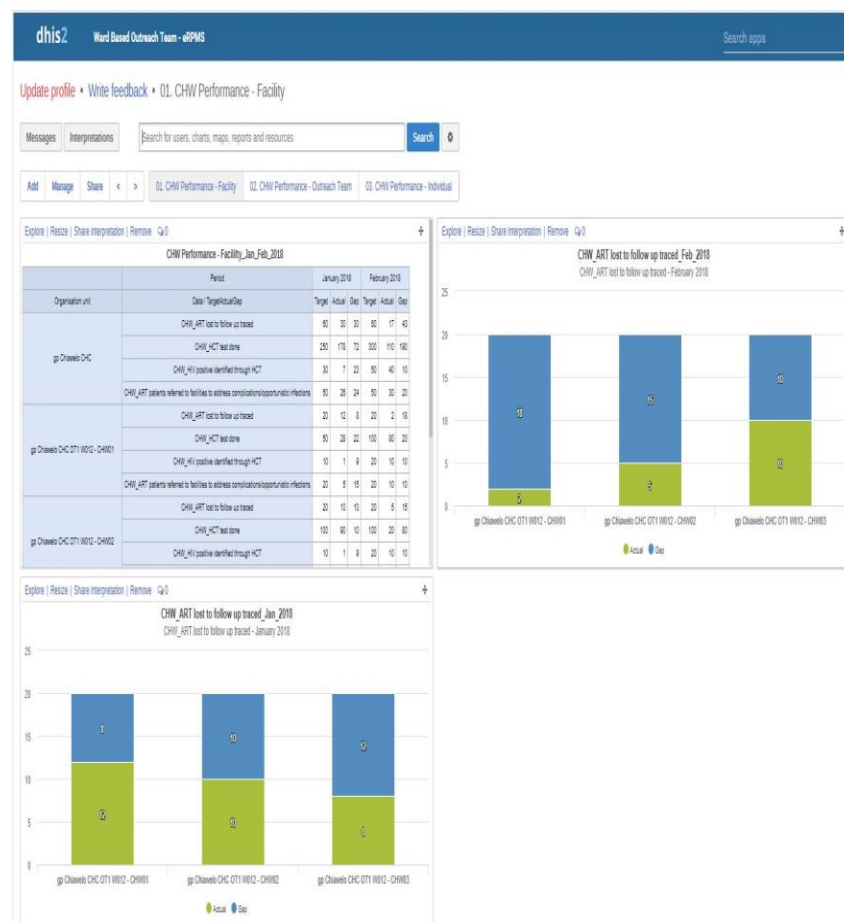
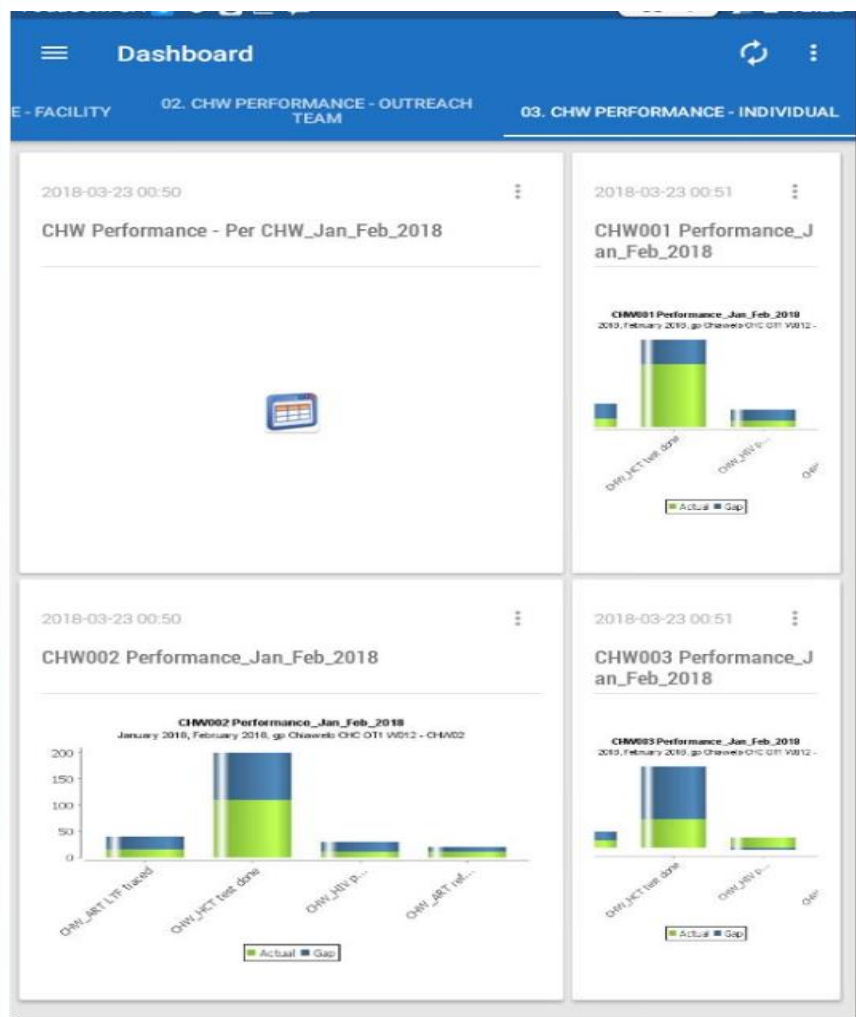
OVERDUE EVENTS			
First Name	Surname	Event name	Due date
Sipho	Dhlamini	Visit and Referral	2018-04-28



# Referral, back referral and feedback loops supporting Patient Management

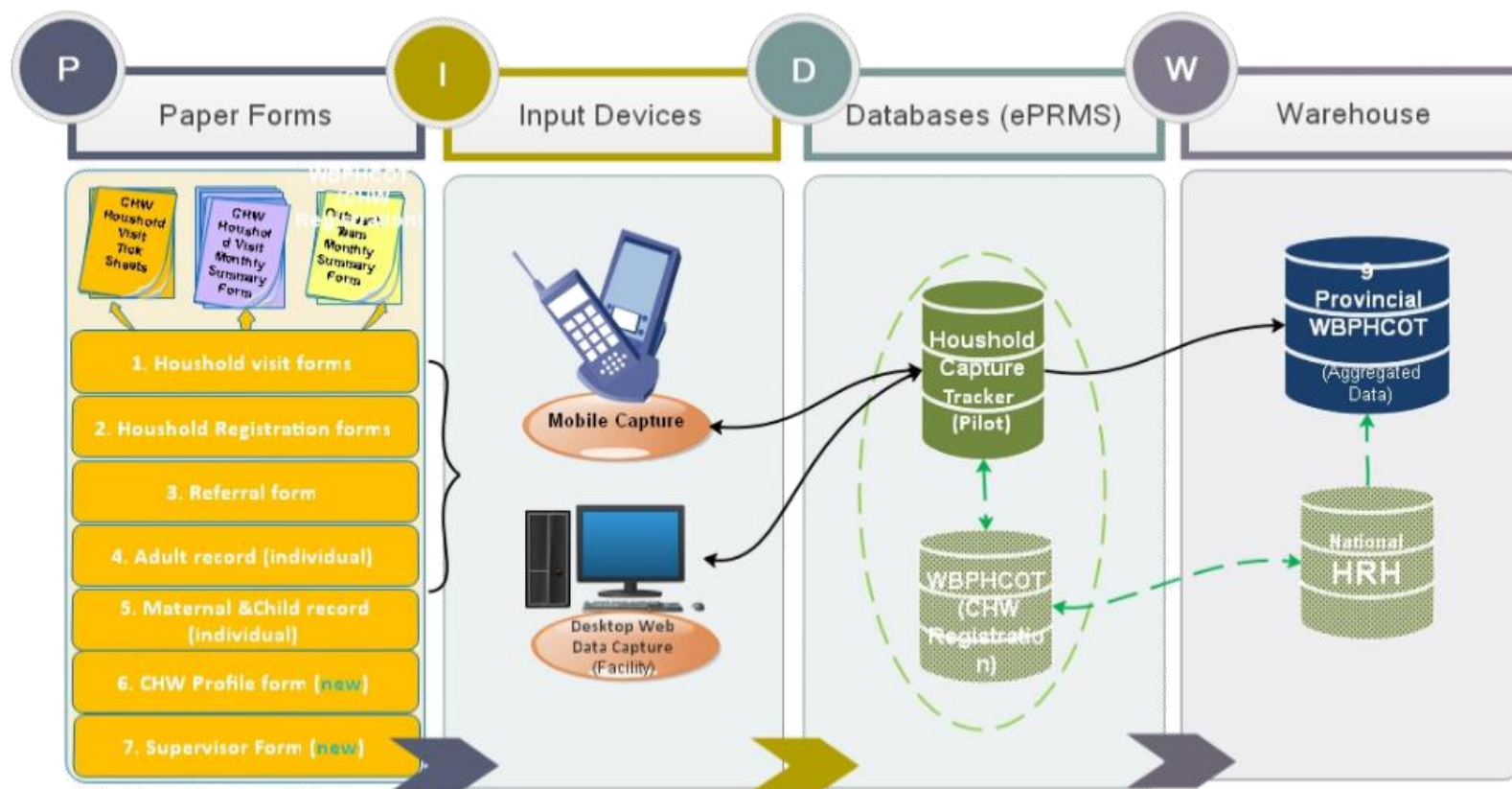
- CHW refers client → facility gets an email or sms notification
- Client seen at facility and back referred to CHW → CHW receives notification
- OTL allocates LTFU clients to relevant CHW → CHW receives notification
- Based on above:
  - CHW traces client and refers back to facility and
  - Client removed from LTFU list

# Dashboard examples





# Data flow





# Users

## **CHW, Team & Facility level (OU 7, 6 & 5)**

- 33 Community Health Workers
- 5 Outreach team leaders
- Information officer
- Facility manager

## **Sub-district – National level(OU 4, 3, 2, 1)**

- WBOT managers



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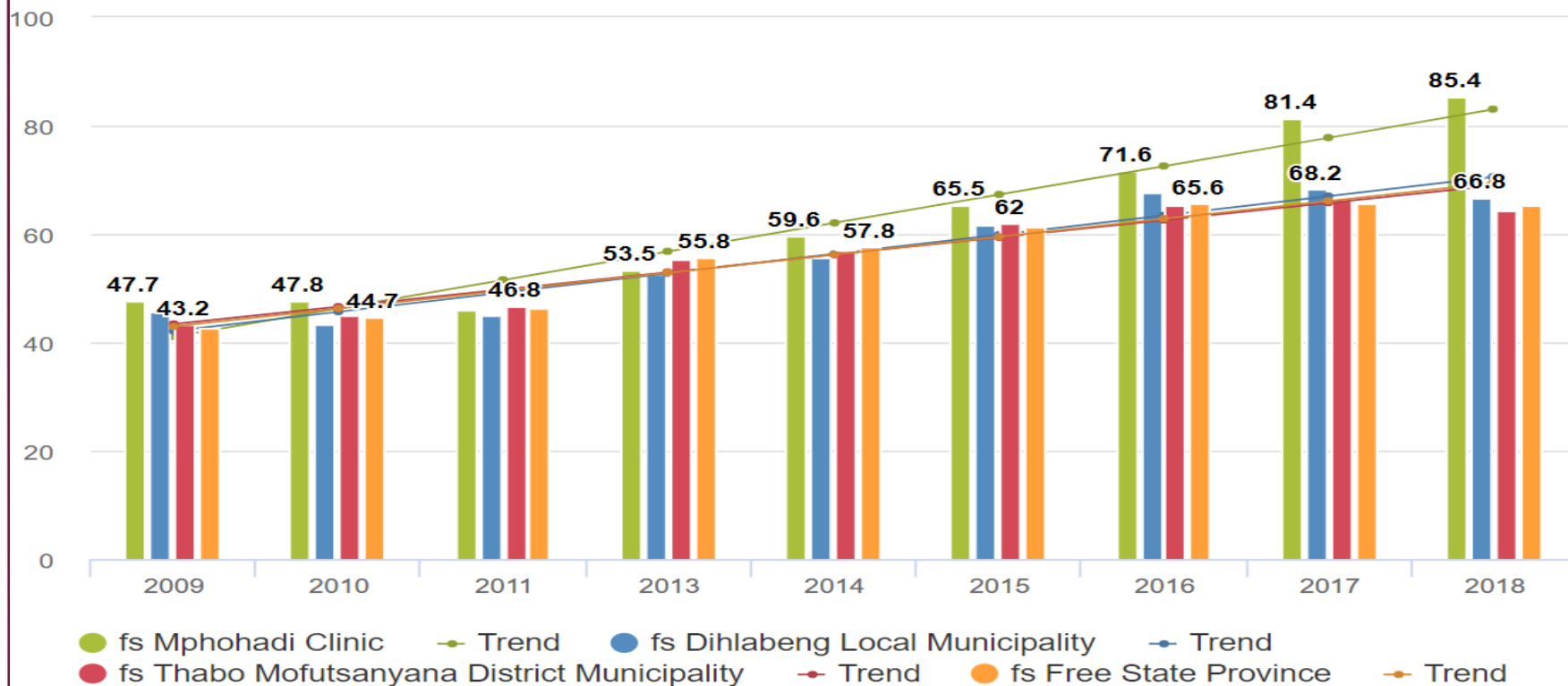
# Results .....

1. Data and data capturing:
  - Online and offline capturing ensures continuity
  - 3 summary forms no longer needed
  - DQ improved (human error)
  - Data flow time lines decreased
  - Monthly extracted into aggregated DHIS2 database (more frequently if needed)
2. CHWs, OTLs and facility managers - monitor progress daily from mobile devices / computers
3. Functionality:
  - If connected, coordinates of household are populated (5-10m accuracy)
4. Technical aspects:
  - Analytics run every night (more frequently if needed)
  - Integrated analysis with aggregated WBOT and facility data



# Results - Health facility data in DHIS2 (aggregated)

Antenatal 1st visit before 20 weeks rate



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# Positive feedback from CHWs & OTLs using tracker

## Community Health Workers

- CHWs mentioned that “using the tablet is quick and fast as compared to using paper based method”
- Data collection processes, timeliness of submission and speed of capturing have improved
- Impressed with offline capturing
- Time spent in households is reduced as questions asked by the program are relevant and the device is user friendly

## Outreach Team Leaders

- Outreach Team Leaders (OTL) can monitor the performance of CHWs daily

## Information officer

- Data accuracy has improved
- Alignment to the NIDS helps in that data is uploaded to the FS instance, collected elements populated automatically without requiring any intervention from the facility data capture

# Barriers when using tracker

## Trust Barrier:

- Some community members do not trust CHWs with their personal details since the use of tablets is associated with scams
- **Solution:** All teams equipped with paper forms to manually capture data in the event of device malfunction or client preference

## Theft Barrier:

- “carrying a tablet in some communities is a security concern since we can be mugged.”
- **Solution:** Safety and security training will be covered in initial training and reiterated weekly through OTL supervisors. If clusters of theft occur in a given area; mobile devices will be discontinued until safety can be assured



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# Conclusion

- In line with international recommendations, inclusion of CHW data into the health facility information system to which they are attached ensures CHW work is part of the national health information system
- Successful pilot allows NDoH to now move towards:
  - Establish HRH registry for South Africa for CHW
  - Establish eRPMS system for South Africa
  - strengthen the current data management processes, including M&E

# CHW mobile data capturing and data access

